

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 10
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) MOVEON.ORG POLITICAL ACTION		FEC IDENTIFICATION NUMBER ▼ C C00341396	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M / D D / Y Y Y Y Y Y 10 / 18 / 2016	

Full Name of Payee Atkins, Casey, , ,		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 13 / 2016	
Mailing Address 4 Aberdeen Road		Amount 400.00	
City Somerville	State MA	Zip Code 02144	Transaction ID : SE.11209
Purpose of Expenditure Ad Production	Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 13 / 2016	
Name of Federal Candidate CLINTON, HILLARY RODHAM, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		127332.49	

Full Name of Payee Chong & Koster		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 10 / 2016	
Mailing Address 1244 19th St. NW		Amount 500.00	
City Washington	State DC	Zip Code 20036	Transaction ID : SE.10095
Purpose of Expenditure Online Advertising	Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 11 / 2016	
Name of Federal Candidate TRUMP, DONALD J., , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		111018.19	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	900.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Matzzie, Tom, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 21 / 2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 2 OF 10
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) MOVEON.ORG POLITICAL ACTION		FEC IDENTIFICATION NUMBER ▼ C C00341396	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 10 / 18 / 2016	

Full Name of Payee Chong & Koster		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 12 / 2016	
Mailing Address 1244 19th St. NW		Amount 7500.00	
City Washington	State DC	Zip Code 20036	Transaction ID : SE.10096
Purpose of Expenditure Online Advertising	Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 12 / 2016	
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		120843.99	

Full Name of Payee Chong & Koster		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 18 / 2016	
Mailing Address 1244 19th St. NW		Amount 5000.00	
City Washington	State DC	Zip Code 20036	Transaction ID : SE.11279
Purpose of Expenditure Online Advertising	Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 12 / 2016	
Name of Federal Candidate CLINTON, HILLARY RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		125928.99	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	12500.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Matzzie, Tom, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 / 21 / 2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 3 OF 10
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) MOVEON.ORG POLITICAL ACTION		FEC IDENTIFICATION NUMBER ▼ C C00341396	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y 10 / 18 / 2016</div>	

Full Name of Payee Columbia Road Media		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y 10 / 13 / 2016</div>	
Mailing Address PO Box 53335		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">249.65</div>	
City Washington	State DC	Zip Code 20009	Transaction ID : SE.11219
Purpose of Expenditure Internet Advertising		Category/ Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y 10 / 13 / 2016</div>
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">127631.14</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Envato Markets		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y 10 / 13 / 2016</div>	
Mailing Address 215 South State Street Suite 1200		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">9.00</div>	
City Salt Lake City	State UT	Zip Code 84111	Transaction ID : SE.11206
Purpose of Expenditure Ad Production		Category/ Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y 10 / 13 / 2016</div>
Name of Federal Candidate CLINTON, HILLARY RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">126932.49</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">258.65</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Matzzie, Tom, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 21 / 2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 4 OF 10
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) MOVEON.ORG POLITICAL ACTION		FEC IDENTIFICATION NUMBER ▼ C C00341396	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M / D D / Y Y Y Y Y Y 10 / 18 / 2016	

Full Name of Payee Facebook		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 10 / 2016	
Mailing Address 1601 Willow Rd		Amount 63.00	
City Menlo Park	State CA	Zip Code 94025	Transaction ID : SE.10097
Purpose of Expenditure Internet Advertising	Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 10 / 2016	
Name of Federal Candidate CLINTON, HILLARY RODHAM, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		106218.19	

Full Name of Payee Facebook		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 12 / 2016	
Mailing Address 1601 Willow Rd		Amount 36.00	
City Menlo Park	State CA	Zip Code 94025	Transaction ID : SE.11188
Purpose of Expenditure Internet Advertising	Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 12 / 2016	
Name of Federal Candidate TRUMP, DONALD J., , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		120879.99	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	99.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Matzzie, Tom, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 21 / 2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 5 OF 10
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) MOVEON.ORG POLITICAL ACTION		FEC IDENTIFICATION NUMBER ▼ C C00341396	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 10 / 18 / 2016	

Full Name of Payee Facebook		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 13 / 2016	
Mailing Address 1601 Willow Rd		Amount 416.50	
City Menlo Park	State CA	Zip Code 94025	Transaction ID : SE.11200
Purpose of Expenditure Internet Advertising	Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 13 / 2016	
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		126923.49	

Full Name of Payee Facebook		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 12 / 2016	
Mailing Address 1601 Willow Rd		Amount 1000.00	
City Menlo Park	State CA	Zip Code 94025	Transaction ID : SE.11225
Purpose of Expenditure Internet Advertising	Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 14 / 2016	
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		154371.18	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1416.50
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Matzie, Tom, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 / 21 / 2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 6 OF 10
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) MOVEON.ORG POLITICAL ACTION		FEC IDENTIFICATION NUMBER ▼ C C00341396	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M / D D / Y Y Y Y Y Y 10 / 18 / 2016	

Full Name of Payee Facebook		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 14 / 2016	
Mailing Address 1601 Willow Rd		Amount 35.70	
City Menlo Park	State CA	Zip Code 94025	Transaction ID : SE.11238
Purpose of Expenditure Internet Advertising	Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 14 / 2016	
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		154556.88	

Full Name of Payee Facebook		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 14 / 2016	
Mailing Address 1601 Willow Rd		Amount 134.94	
City Menlo Park	State CA	Zip Code 94025	Transaction ID : SE.11240
Purpose of Expenditure Internet Advertising	Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 14 / 2016	
Name of Federal Candidate CLINTON, HILLARY RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		154791.82	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	170.64
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Matzzie, Tom, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 21 / 2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 7 OF 10
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) MOVEON.ORG POLITICAL ACTION		FEC IDENTIFICATION NUMBER ▼ C C00341396	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 10 / 18 / 2016	

Full Name of Payee Luxeve Media, LLC		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 12 / 2016	
Mailing Address 1026 Atlanta Ave Unit D		Amount 750.00	
City Decatur	State GA	Zip Code 30030	Transaction ID : SE.11237
Purpose of Expenditure Ad Production		Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 14 / 2016
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		155541.82	

Full Name of Payee Pond5 Inc.		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 12 / 2016	
Mailing Address 251 Park Ave S 7th Floor		Amount 480.00	
City New York	State NY	Zip Code 10010	Transaction ID : SE.11287
Purpose of Expenditure Ad Production		Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 12 / 2016
Name of Federal Candidate CLINTON, HILLARY RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		126506.99	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1230.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Matzzie, Tom, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 / 21 / 2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 8 OF 10
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) MOVEON.ORG POLITICAL ACTION	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00341396 </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on	
<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 10 / 18 / 2016</div> </div>	

Full Name of Payee Premium Beat	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2016 </div>
Mailing Address 4398 St-Laurent	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 49.00 </div>
City Montreal State ZZ Zip Code	Transaction ID : SE.11191 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2016 </div>
Purpose of Expenditure Ad Production	Category/Type
Name of Federal Candidate TRUMP, DONALD J., ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 120928.99 </div>
Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Premium Beat	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2016 </div>
Mailing Address 4398 St-Laurent	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 98.00 </div>
City Montreal State ZZ Zip Code	Transaction ID : SE.11285 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2016 </div>
Purpose of Expenditure Ad Production	Category/Type
Name of Federal Candidate CLINTON, HILLARY RODHAM, ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 126026.99 </div>
Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 147.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 147.00 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Matzzie, Tom, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 21 / 2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 9 OF 10
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) MOVEON.ORG POLITICAL ACTION		FEC IDENTIFICATION NUMBER ▼ C C00341396	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 10 / 18 / 2016	

Full Name of Payee Premium Beat		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 13 / 2016	
Mailing Address 4398 St-Laurent		Amount 49.00	
City Montreal	State ZZ	Zip Code	Transaction ID : SE.11211
Purpose of Expenditure Ad Production	Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 13 / 2016	
Name of Federal Candidate CLINTON, HILLARY RODHAM, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		127381.49	

Full Name of Payee Rising Tide Interactive		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 14 / 2016	
Mailing Address 1250 H Street, NW Suite 200		Amount 14000.00	
City Washington	State DC	Zip Code 20005	Transaction ID : SE.11221
Purpose of Expenditure Internet Advertising	Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 14 / 2016	
Name of Federal Candidate CLINTON, HILLARY RODHAM, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		153371.18	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	14049.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Matzzie, Tom, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 / 21 / 2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 10 OF 10
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) MOVEON.ORG POLITICAL ACTION		FEC IDENTIFICATION NUMBER ▼ C C00341396	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M / D D / Y Y Y Y Y Y 10 / 18 / 2016	

Full Name of Payee Songs of Universal, Inc.		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 14 / 2016	
Mailing Address 2100 Colorado Avenue		Amount 100.00	
City Santa Monica	State CA	Zip Code 90404	Transaction ID : SE.11239
Purpose of Expenditure Ad Production	Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 14 / 2016	
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		154656.88	

Full Name of Payee Thunderclap		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 14 / 2016	
Mailing Address 222 Boadway		Amount 150.00	
City New York	State NY	Zip Code 10038	Transaction ID : SE.11228
Purpose of Expenditure Internet Advertising	Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 14 / 2016	
Name of Federal Candidate CLINTON, HILLARY RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		154521.18	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	250.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	31020.79

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Matzzie, Tom, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 21 / 2016

Signature